

## SUPPLEMENT TO STATEMENT OF FACTS (PICKLE ELIGIBILITY DETERMINATION)

Case name	Case number
-----------	-------------

Applicant's name

1. Do you (separately, or jointly with another person) own household goods or personal items, including a musical instrument and/or recreational vehicle valued at more than \$500 per item? ☐ Yes ☐ No If yes, list below:

Item	Total Value of Each Item	Amount Owed on Each Item	Owned Jointly	Owned Separately
			(Check One.)	

a. Is recreational vehicle used as your principal residence? ☐ Yes ☐ No

b. If yes, is it your only source of transportation? ☐ Yes ☐ No

2. Do you own one or more vehicles, including boats, motorcycles, snowmobiles, etc? ☐ Yes ☐ No  
If yes, list below.

Vehicle	Blue-book Value	Amount Owed

If yes, list vehicle(s) which is necessary for self-support: \_\_\_\_\_

3. Do you have a retirement account, such as a KEOGH or IRA account? ☐ Yes ☐ No

If yes, amount on deposit \$ \_\_\_\_\_ Account number(s): \_\_\_\_\_

Name of financial institution

Address of financial institution	City	State	ZIP code
----------------------------------	------	-------	----------

4. Do you have a burial fund (not burial insurance or contract with a funeral home)? ☐ Yes ☐ No

If yes, amount on deposit \$ \_\_\_\_\_ Account number(s): \_\_\_\_\_

Name of financial institution

Address of financial institution	City	State	ZIP code
----------------------------------	------	-------	----------

Applicant/representative signature	Date
------------------------------------	------